

# COMMITTEE REPORT

## MADAM PRESIDENT:

**The Senate Committee on Health and Provider Services, to which was referred Senate Bill No. 270, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill be AMENDED as follows:**

- 1       Page 1, delete lines 16 through 17.
- 2       Delete pages 2 through 6.
- 3       Page 12, delete lines 41 through 42.
- 4       Page 13, delete lines 1 through 23.
- 5       Page 25, between lines 40 and 41, begin a new paragraph and insert:
- 6       "SECTION 32. IC 12-14-22-4.5 IS ADDED TO THE INDIANA
- 7       CODE AS A NEW SECTION TO READ AS FOLLOWS
- 8       [EFFECTIVE JULY 1, 2006]: **Sec. 4.5. TANF records that would**
- 9       **identify an individual who has applied for or is receiving cash**
- 10      **assistance or supportive services under the TANF program:**
- 11           **(1) are not public records;**
- 12           **(2) are confidential; and**
- 13           **(3) are exempt from the disclosure requirements of**
- 14           **IC 5-14-3-3."**
- 15      Page 26, between lines 28 and 29, begin a new paragraph and insert:
- 16      "SECTION 37. IC 12-15-15-2.7 IS ADDED TO THE INDIANA
- 17      CODE AS A NEW SECTION TO READ AS FOLLOWS
- 18      [EFFECTIVE JULY 1, 2006]: **Sec. 2.7. (a) This section applies after**
- 19      **December 31, 2006.**
- 20           **(b) If the office requires the collection of a copayment for**
- 21      **nonemergency services that are provided to a Medicaid recipient**

- 1       **in an emergency room, the copayment:**
- 2               **(1) must be collected by:**
- 3                   **(A) the office; or**
- 4                   **(B) the managed care organization, if the recipient is**
- 5                   **enrolled in a managed care organization; and**
- 6               **(2) may not be considered by the office, or a managed care**
- 7               **organization if the recipient is enrolled in a managed care**
- 8               **organization, in:**
- 9                   **(A) determining the reimbursement rates; or**
- 10                  **(B) reimbursing a provider;**
- 11       **for the nonemergency services."**
- 12       Page 26, line 33, delete "ninety (90)" and insert "**sixty (60)**".
- 13       Page 26, line 40, delete "ninety (90)" and insert "**sixty (60)**".
- 14       Page 27, line 26, reset in roman "If the division does not make a
- 15       determination of the".
- 16       Page 27, reset in roman lines 27 through 30.
- 17       Page 28, line 35, reset in roman "If the division does not make its
- 18       determination".
- 19       Page 28, reset in roman lines 36 through 42.
- 20       Page 29, reset in roman line 1.
- 21       Page 29, line 7, delete "ninety (90)" and insert "**sixty (60)**".
- 22       Page 29, line 15, delete "ninety (90)" and insert "**sixty (60)**".
- 23       Page 32, line 18, after "waiver" insert "**on the later of the**
- 24       **following:**
- 25               **(1) January 1, 2007.**
- 26               **(2)".**
- 27       Renumber all SECTIONS consecutively.
- (Reference is to SB 270 as introduced.)

**and when so amended that said bill do pass.**

Committee Vote: Yeas 7, Nays 0.

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Miller

Chairperson